

STATINTL

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|---|-----------|------------------------|--|
| OFFICE MESSAGE | | | |
| | | <i>18/1/57</i> DATE | |
| TO: | | | |
| NAME (PERSON CALLING) | | IN PERSON | |
| | | TELEPHONE | |
| A.M. | | P.M. | |
| TELEPHONE | | RETURNED YOUR CALL | |
| NUMBER | EXTENSION | WILL CALL AGAIN | |
| | | PLEASE CALL | |
| REMARKS: | | | |
| <div style="background-color: black; width: 150px; height: 40px; margin-bottom: 10px;"></div> <i>has no one</i> <i>for SIS instructions</i> <i>PA</i> <i>for</i> | | | |
| FORM NO. 36-9 SEP 1946 | | RECEIVED BY <i>W96</i> | |